

UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEW JERSEY

Caption in Compliance with D.N.J. LBR 9004-1(b)

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In Re:

Elie Valerius

Debtor.

Case No.: 20-22439

Judge: JKS

Chapter: 13

CHAPTER 13 DEBTOR'S CERTIFICATION IN OPPOSITION

The debtor in this case opposes the following (**choose one**):

1. ☐ Motion for Relief from the Automatic Stay filed by _____ ,
creditor,

A hearing has been scheduled for _____ , at _____ .

- ☐ Motion to Dismiss filed by the Chapter 13 Trustee.

A hearing has been scheduled for _____ , at _____ .

- ☒ Certification of Default filed by Chapter 13 Standing Trustee ,

I am requesting a hearing be scheduled on this matter.

2. I oppose the above matter for the following reasons (**choose one**):

- ☐ Payments have been made in the amount of \$ _____ , but have not
been accounted for. Documentation in support is attached.

☒ Payments have not been made for the following reasons and debtor proposes repayment as follows (**explain your answer**):

☐ Other (**explain your answer**):

Mortgage was paid off on December 29,2022. Documentation in support is attached.

3. This certification is being made in an effort to resolve the issues raised in the certification of default or motion.

4. I certify under penalty of perjury that the above is true.

Date: 11/15/2023

/s/Elie Valerius
Debtor's Signature

Date: _____

Debtor's Signature

NOTES:

1. Under D.N.J. LBR 4001-1(b)(1), this form must be filed with the court and served on the Chapter 13 Trustee and creditor, if applicable not later than 7 days before the date of the hearing if filed in opposition to a Motion for Relief from the Automatic Stay or Chapter 13 Trustee's Motion to Dismiss.
2. Under D.N.J. 4001-1 (b)(2), this form must be filed with the court and served on the Chapter 13 Trustee and creditor, if applicable not later than 14 days after the filing of a Certification of Default.

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Wire Transfer Outgoing Request



Wire Transfer Sender Information

Sender Name: MARIE LICIN-VALERIUS				
Account Name: MARIE LICIN-VALERIUS				
Street Address: 20 41ST ST				
City: IRVINGTON	State: NJ	Zip: 07111-1255	Country: USA	Daytime Phone: 973-204-0527
Primary ID Type: Driver's License	ID Issuer: NJ	ID Number: [REDACTED]	ID Issue Date: 06/10/2022	ID Exp. 01/20/2026
Secondary ID Type:	ID Issuer:	ID Number:	ID Issue Date:	ID Exp:
Comments:				

Wire Transfer Information

Request Date: 11/26/2022	Request time: 12:35:30PM Eastern time	Effective date: 11/28/2022	Wire type: Domestic
Debit Account #: XXXXXX [REDACTED]	Debit Account Type: CHASE SAVINGS	Wire Amount (US dollars): \$81,248.47	
Qualifying Account #:	Qualifying Account Type:	Source of funds: Savings	Wire Fee: \$35.00
Currency type to be sent: US Dollars	Exchange rate: N/A	Foreign currency amount: N/A	Amount to Collect (USD): \$81,283.47
FX Contract Number:			

Recipient Account Information

Account Name: mr cooper			
Street Address:		Account Number: [REDACTED]	
City:	State:	Zip:	Country:
Text to Recipient: Acc Number 0694764051			

Receiving Bank Information

Bank Name: JPMorgan Chase Bank National Association			
Street Address: 875 Saw Mill River Rd		Bank ABA/SWIFT Code: [REDACTED]	
City: Ardsley	State: NY	Zip: 10502-1117	Country: USA
Intermediary Bank Name:			
Street Address:		Intermediary Bank ABA:	
City:	State:	Zip:	Country:
Text to Receiving Bank:			

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Wire Transfer Outgoing Request



Wire Transfer Sender Information

Sender Name: MARIE LICIN-VALERIUS				
Account Name: MARIE LICIN-VALERIUS				
Street Address: 20 41ST ST				
City: IRVINGTON	State: NJ	Zip: 07111-1255	Country: USA	Daytime Phone: 973-204-8527
Primary ID Type: Driver's License	ID Issuer: NJ	ID Number: [REDACTED]	ID Issue Date: 06/10/2022	ID Exp: 01/20/2026
Secondary ID Type:	ID Issuer:	ID Number:	ID Issue Date:	ID Exp:
Comments:				

Wire Transfer Information

Request Date: 12/02/2022	Request time: 04:18:09PM Eastern time	Effective date: 12/02/2022	Wire Type: Domestic
Debit Account #: [REDACTED]	Debit Account Type: CHASE SAVINGS	Wire Amount (US dollars): \$4,953.33	
Qualifying Account #:	Qualifying Account Type:	Source of funds: Savings	Wire Fee: \$35.00
Currency type to be sent: US Dollars	Exchange rate: N/A	Foreign currency amount: N/A	Amount to Collect (USD): \$4,988.33
FX Contract Number:			

Recipient Account Information

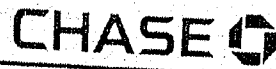
Account Name: Mr Cooper			
Street Address:		Account Number: [REDACTED]	
City:	State:	Zip:	Country:
Text to Recipient: For Account #0694764051			

Receiving Bank Information

Bank Name: JPMorgan Chase Bank National Association			
Street Address: 875 Saw Mill River Rd		Bank ABA/SWIFT Code: [REDACTED]	
City: Ardsley	State: NY	Zip: 10502-1117	Country: USA
Intermediary Bank Name:			
Street Address:		Intermediary Bank ABA:	
City:	State:	Zip:	Country:
Text to Receiving Bank:			

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Wire Transfer Outgoing Request



Wire Transfer Sender Information

Sender Name: MARIE LICIN-VALERIUS					
Account Name: ELIE VALERIUS OR MARIE V LICIN-VALERIUS			Street Address: 20 41ST ST		
City: IRVINGTON	State: NJ	Zip: 07111-1255	Country: USA	Daytime Phone: 973-204 8527	
Primary ID Type: Driver's License	ID Issuer: NJ	ID Number: [REDACTED]	ID Issue Date: 06/10/2022	ID Exp: 01/20/2026	
Secondary ID Type:	ID Issuer:	ID Number:	ID Issue Date:	ID Exp:	
Comments:					

Wire Transfer Information

Request Date: 12/29/2022	Request time: 03:11:50PM Eastern time	Effective date: 12/29/2022	Wire Type: Domestic
Debit Account #: [REDACTED]	Debit Account Type: PREMIER PLUS CKG	Wire Amount (US dollars): \$35.00	* \$35.00
Qualifying Account #:	Qualifying Account Type:	Source of funds: Checking	
Currency type to be sent: US Dollars	Exchange rate: N/A	Foreign currency amount: N/A	Amount to Collect (USD): \$70.00
FX Contract Number:			

Recipient Account Information

Account Name: Mr Cooper			
Street Address:		Account Number: [REDACTED]	
		City:	State: Zip: Country:
Text to Recipient:			

Receiving Bank Information

Bank Name: JPMorgan Chase Bank National Association			
Street Address: 875 Saw Mill River Rd		Bank ABA/SWIFT Code: [REDACTED]	
		City: Ardsley	State: Zip: Country: NY 10502-1117 USA
Intermediary Bank Name:			
Street Address:		Intermediary Bank ABA:	
		City:	State: Zip: Country:
Text to Receiving Bank:			

Mr cooper

11/14/22
21:37:59
CPY-EDT

Payoff/Grace Include/omit items

PG DB 11/14/22 Int Paid To 8/01/22
Next Due Dt 3/01/22 Int Rate 9.525
Per Diem Int 22.02 Int Calc 2,295.88
Plan Number 00001

Items to Include or Omit:

ow Balance	5.90	2 Total Late Charges	0.00
rent on Escrow	0.00	1 Total NSF Charges	0.00
ow Advance	3,618.20	2 Optional Ins Payment	0.00
1 Suspense Bal	2,085.50	2 Prepayment Penalty	0.00
ow Expense Bal	2,734.26	2 Mortgage Ins Premium	0.00
Fidy	0.00	2 Other Fees Due	0.00
ow Suspense Bal	0.00	2 Rebate Points Financed	300000
ow Hazard Loss	0.00	1 Deferred Principal	0.00
ow Advance	0.00	2 Recording Fee	000000000000
ow Advance Bal	2,123.25	2 Quote fee	000000000000
ow Expense Bal	2,294.27	2 Other COUNTY RECORDING FEE	000000000000
Fault Int Due	0.00	2 CUM ANTICIPATED FEE	000000000000 +
Interest Acc	0.00	2 MBS Diff Difference	0.00
Repaid Ins Rebate	0.00		
1 Date Y/N H			

PO Amt 86,236.80

Exit F5-Refresh F6-New Loan* F10-Print F16-Suspense F24-More keys